Module 2

Communities That Care

Overview:
The Research Foundation and Process

Phase Two:
Organizing, Introducing, Involving

Communities That Care
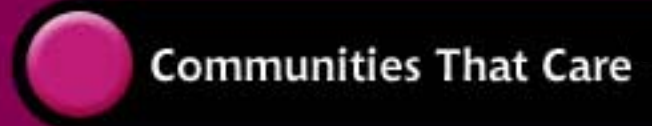
Module 1	Setting the Stage
Module 2	Overview: The Research Foundation and Process ← WE ARE HERE.
Module 3	Milestone: Address Readiness Issues
Module 4	Milestone: Engage Key Leaders
Module 5	Milestone: Educate and Involve the Community
Module 6	Milestone: Create an Effective Community Board
Module 7	Next Steps

Module 2 goal

Provide an overview of the *Communities That Care* research foundation and process.

Objectives

On completing this module, you will be able to:

1. describe what the *Communities That Care* system is and how it helps communities

2. describe the research foundation of the *Communities That Care* system

3. explain how the prevention-science research base helps build positive futures for youth and prevent problem behaviors

4. explain how the *Communities That Care* operating system works

5. describe the benefits of using the *Communities That Care* operating system.
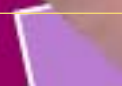
The Communities That Care system...

uses prevention-science research to promote positive youth development and prevent youth behavior problems

provides local control and flexibility to maintain support and sustainability

matches a local profile of risk, protection and problem behaviors to tested, effective programs, policies and practices

focuses on outcomes to ensure accountability for resources.

The research foundation

- The Social Development Strategy

- The public health approach

- Research-based predictors of problem behaviors and positive youth outcomes—risk and protective factors

- Tested, effective prevention strategies

Building positive futures:

"Begin with the end in mind."

—Stephen Covey

"Begin with
the end
in mind."
—Stephen Covey

The Social Development Strategy

Communities That Care

A research-based model that organizes known protective factors into a guiding framework for building positive futures for children

The goal…
Healthy behaviors
for all children and youth

Start with…
Healthy beliefs & clear standards
…in families, schools, communities and peer groups

Building protection:

The Social Development Strategy

Build…
Bonding
• **Attachment**   • **Commitment**
…to families, schools, communities and peer groups

By providing…
Opportunities
…in families, schools, communities and peer groups

By providing…
Skills

By providing…
Recognition

And by nurturing…
Individual characteristics

Prevention-science research base

- The Social Development Strategy

- The public health approach

The public health approach

Program implementation and evaluation

Interventions

Identify risk and protective factors

Define the problem

Problem

Response

The public health approach

- Based on research on predictors of health problems

- Modifies predictors to prevent behavior problems

- Can affect the entire social environment

- Works through collaboration

- Can create long-lasting results

Prevention-science research base
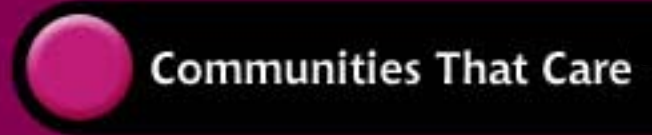
- The Social Development Strategy

- The public health approach

- Research-based predictors of problem behaviors and positive youth outcomes—risk and protective factors

Predictors of problem behaviors and positive youth outcomes

Risk factors

Research has identified *risk factors* in four domains:

Risk factors are predictive of higher levels of adolescent substance abuse, delinquency, teen pregnancy, school drop-out and violence.

school

family

community

peer and individual

Risk factors

- Research-based
- Predictive in multiple longitudinal studies
- Present in all areas of influence
- Predictive of multiple problem behaviors
- Present throughout development
- Work similarly across racial lines
- Measurable
- Buffered by protective factors

Community risk factors

Adolescent problem behaviors	Substance Abuse	Delinquency	Teen Pregnancy	School Drop-Out	Violence
Availability of Drugs	✓				✓
Availability of Firearms		✓			✓
Community Laws and Norms Favorable toward Drug Use, Firearms and Crime	✓	✓			✓
Media Portrayals of Violence					✓
Transitions and Mobility	✓	✓		✓	
Low Neighborhood Attachment and Community Disorganization	✓	✓			✓
Extreme Economic Deprivation	✓	✓	✓	✓	✓

Family risk factors

Adolescent problem behaviors	Substance Abuse	Delinquency	Teen Pregnancy	School Drop-Out	Violence
Family History of the Problem Behavior	✓	✓	✓	✓	✓
Family Management Problems	✓	✓	✓	✓	✓
Family Conflict	✓	✓	✓	✓	✓
Favorable Parental Attitudes and Involvement in the Problem Behavior	✓	✓			✓

School risk factors

Adolescent problem behaviors	Substance Abuse	Delinquency	Teen Pregnancy	School Drop-Out	Violence
Academic Failure Beginning in Late Elementary School	✓	✓	✓	✓	✓
Lack of Commitment to School	✓	✓	✓	✓	✓

Peer and individual risk factors

Adolescent problem behaviors	Substance Abuse	Delinquency	Teen Pregnancy	School Drop-Out	Violence
Early and persistent antisocial behavior	✓	✓	✓	✓	✓
Rebelliousness	✓	✓		✓	
Friends who engage in the problem behavior	✓	✓	✓	✓	✓
Gang involvement	✓	✓			✓
Favorable attitudes toward the problem behavior	✓	✓	✓	✓	
Early initiation of the problem behavior	✓	✓	✓	✓	✓
Constitutional factors	✓	✓			✓

Predictors of problem behaviors and positive youth outcomes
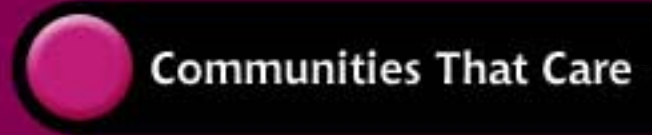
Protective factors

Research has identified *protective factors* in four domains:

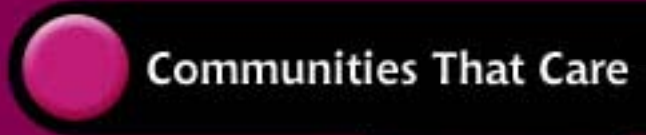Protective factors buffer young people's exposure to risk.

Protective factors

- Research-based
- Present in all areas of influence
- Measurable
- Predictive of positive youth development
- Present throughout development
- Buffer effects of risk exposure

Protective factors

- Individual factors
    - High intelligence
    - Resilient temperament
    - Prosocial orientation
    - Competencies and skills
- Prosocial opportunities
- Reinforcement for prosocial involvement
- Bonding
- Healthy beliefs and clear standards

The goal…
Healthy behaviors
for all children and youth

Communities That Care

Start with…
Healthy beliefs & clear standards
…in families, schools, communities and peer groups

Building protection:

The Social Development Strategy

Build…
Bonding
• Attachment   • Commitment
…to families, schools, communities and peer groups

By providing…
Opportunities

By providing…
Skills

By providing…
Recognition
…to families, schools, communities and peer groups

And by nurturing…
Individual characteristics

Frameworks for community action

The Search Institute's framework:
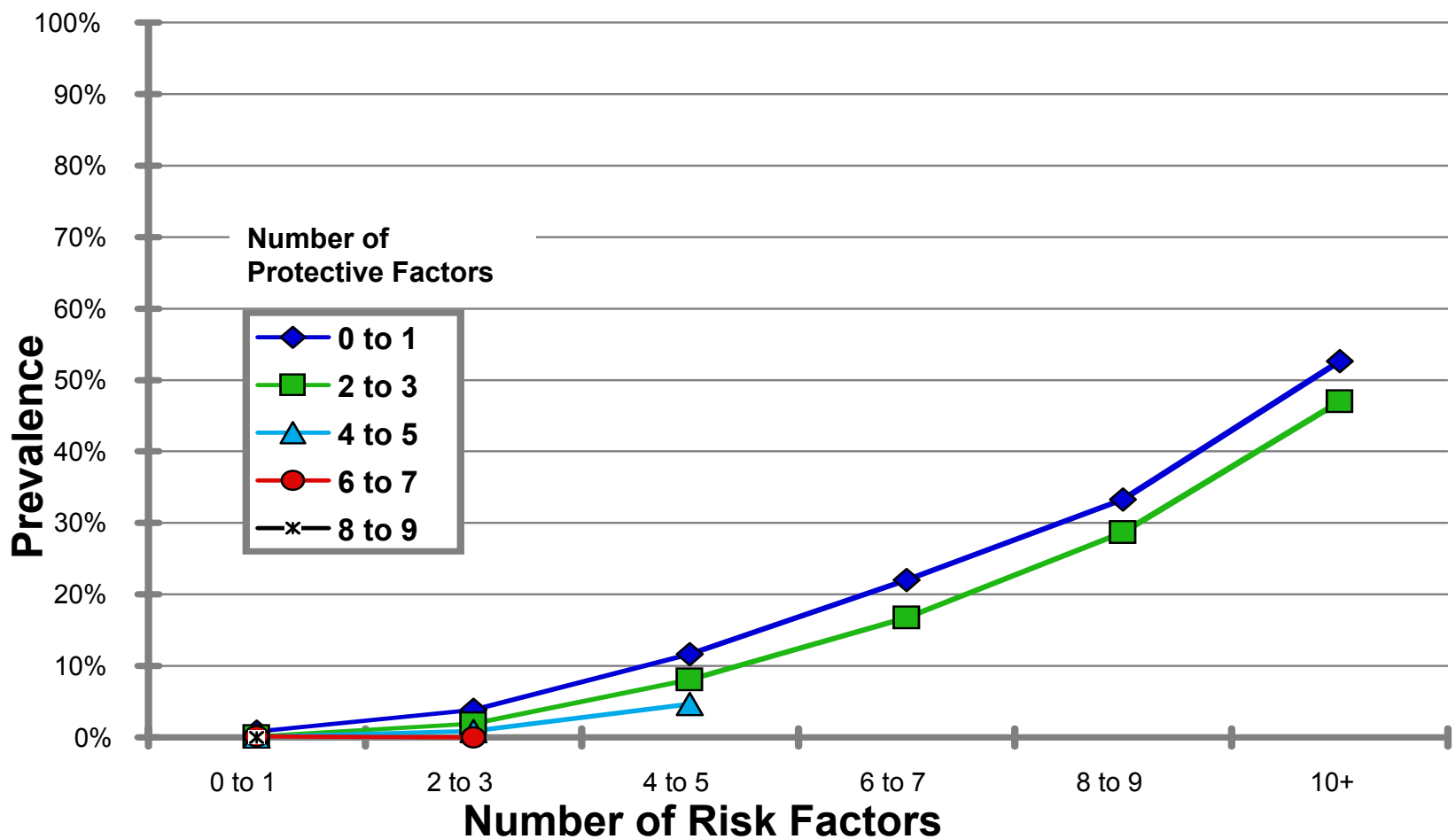
- assesses external and internal assets

- promotes positive youth development by enhancing assets.

The *Communities That Care* framework:

- uses the Social Development Strategy

- assesses risk *and* protective factors

- matches risk and protection profiles with tested, effective programs

- promotes positive youth development by reducing risk *and* enhancing protection.

Association of risk- and protective-factor levels with marijuana use (past 30 days)

Communities That Care

Number of Protective Factors

- ◆ 0 to 1
- ■ 2 to 3
- ▲ 4 to 5
- ● 6 to 7
- ✳ 8 to 9

Prevalence (y-axis: 0% to 100%)

Number of Risk Factors (x-axis: 0 to 1, 2 to 3, 4 to 5, 6 to 7, 8 to 9, 10+)

Association of risk- and protective-factor levels with taking a gun to school (past year)

Communities That Care

Legend:
- Protection, Level 0
- Protection, Level 1
- Protection, Level 2
- Protection, Level 3
- Protection, Level 4

Y-axis: Prevalence (0%, 5%, 10%, 15%, 20%)

X-axis: Risk Factors (L = 0, L = 1, L = 2, L = 3, L = 4)
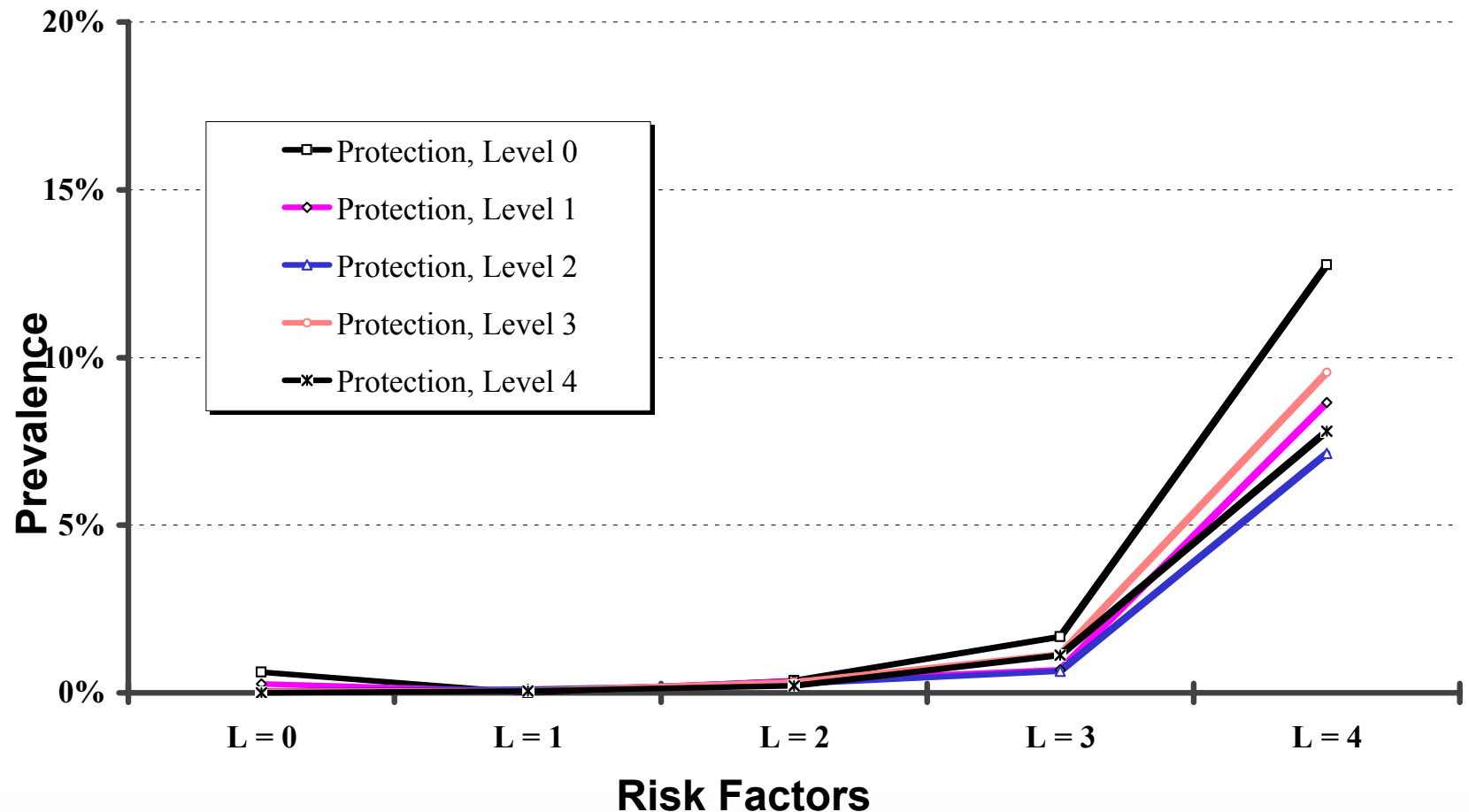
Association of risk- and protective-factor levels with academic success (past year)

Communities That Care
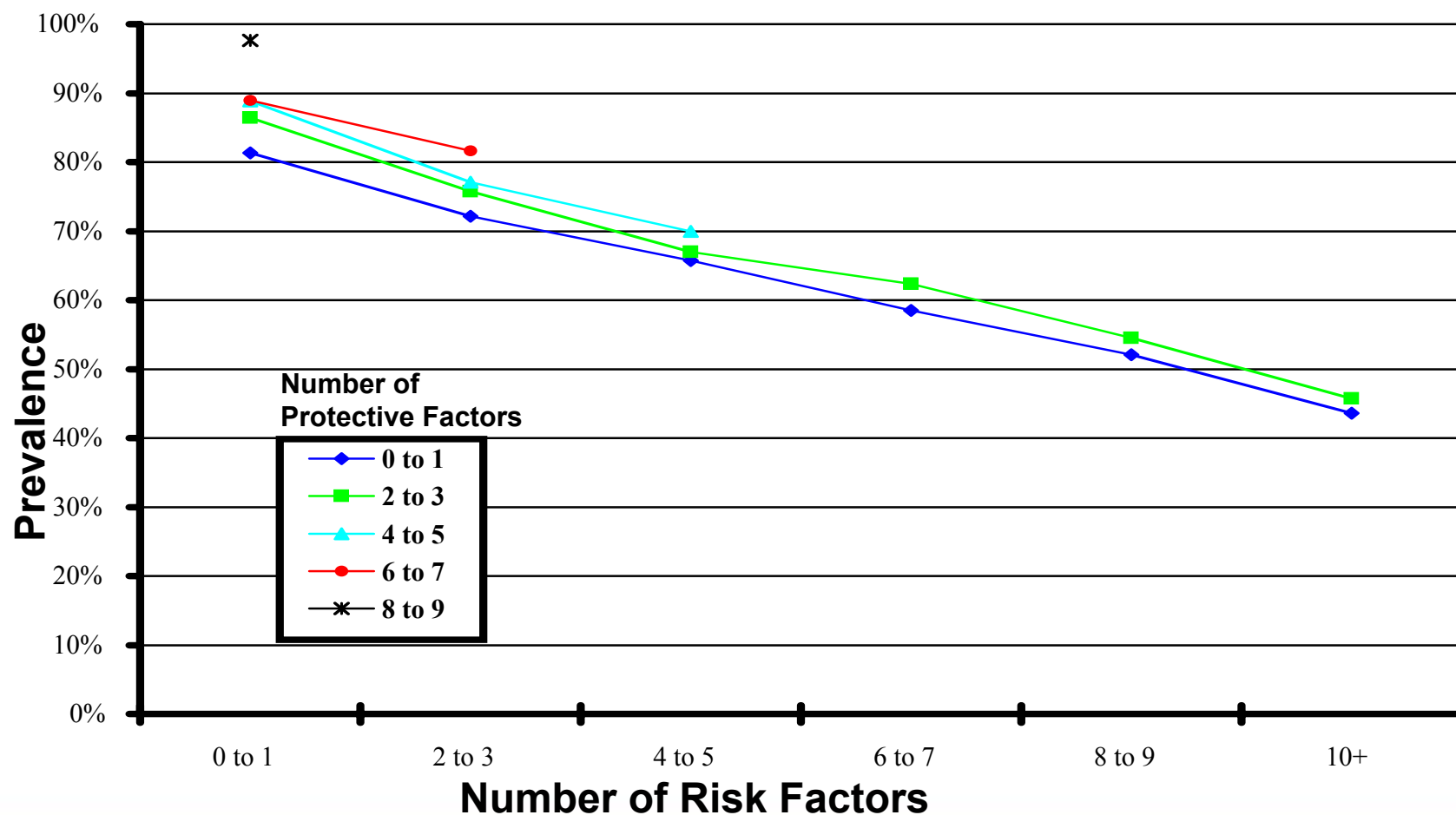
What research has shown about risk and protective factors

- Risk and protective factors exist in all areas of children's lives.

- The more risk factors present, the greater the chances of problem behavior.

- Risk and protective factors can be present throughout development.

- Risk factors are buffered by protective factors.

What research has shown about risk and protective factors

- Common risk and protective factors predict diverse behavior problems.

- Risk and protective factors work similarly across racial lines.

- Both risk and protective factors should be used in prevention efforts.

Prevention-science research base

- The Social Development Strategy

- The public health approach

- Research-based predictors of problem behaviors and positive youth outcomes —risk and protective factors

- Tested, effective prevention strategies

Tested, effective prevention strategies
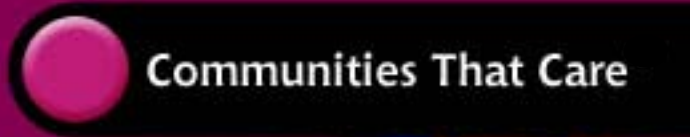
Programs, policies or *practices* that have demonstrated effectiveness in:

- Reducing specific risk factors and enhancing protective factors

- Enhancing positive behaviors and reducing negative behaviors

Effective prevention strategies

- Project STAR
- Adolescent Alcohol Prevention Trial
- Preparing for the Drug-Free Years
  (Now called Families That Care: Guiding Good Choices)
- Adolescents Training and Learning to Avoid Steroids:
  The ATLAS Program
- Project Family
- Strengthening Families Program
- Focus on Families
- Reconnecting Youth
- Adolescent Transitions Program

(National Institute on Drug Abuse, 1997)

What works?

1. Assessing community levels of risk and protection

2. Prioritizing elevated risks and depressed protective factors

3. Including individuals and groups exposed to the highest levels of risk and the lowest levels of protection
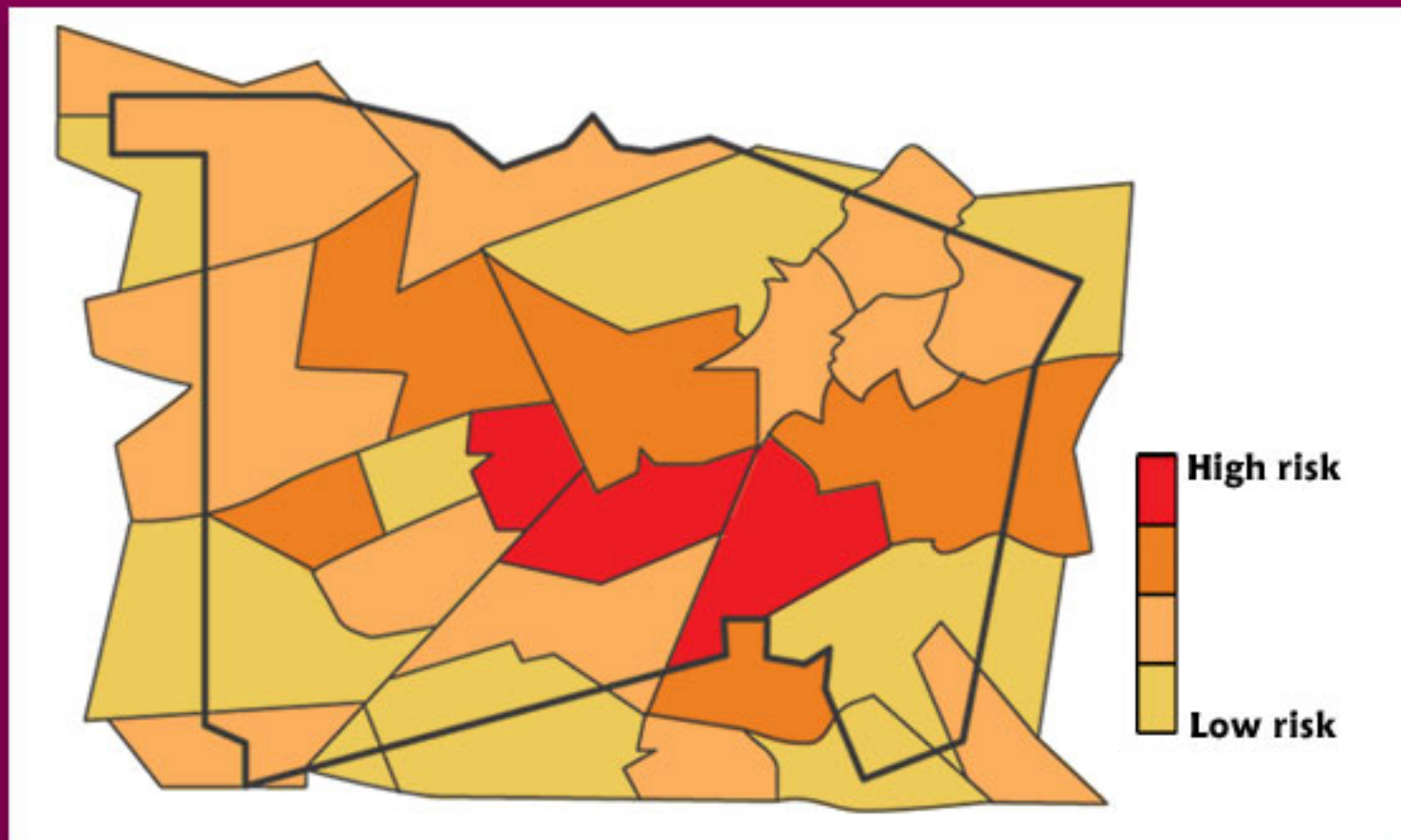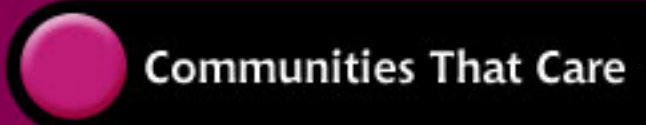
What works?

4. Matching tested, effective programs to the community's risk and protection profile

5. Selecting tested, effective programs that address the racial, economic and cultural characteristics of the community

6. Implementing programs, policies and practices with fidelity at the appropriate ages

Different communities, different strategies

High risk

Low risk

Risk profile: Neighborhood #1

Communities That Care

Risk Factor Scale Scores

- Low Neighborhood Attach.: 51
- Community Disorg.: 50
- Personal Transitions & Mobility: 48
- Laws & Norms Fav./Drug Use & Handguns: 52
- Perceived Avail./Drugs and Handguns: 51
- Poor Family Supervision: 92
- Poor Family Discipline: 89
- Family History of ASB: 88
- Parental Atts. Fav./ATOD Use: 87
- Parental Atts. Fav./ASB: 89
- Poor Academic Performance: 54
- Lack of Commitment to School: 51
- Rebelliousness: 50
- Friends' Delinquent Behavior: 65
- Friends' Use of Drugs: 60
- Peer Rewards for ASB: 62
- Gang Involvement: 54
- Fav. Atts./Antisocial Behavior: 61
- Fav. Atts./ATOD: 62
- Low Perceived Risks of Drug Use: 59
- Early Initiation (Drug Use and ASB): 54
- Sensation Seeking: 53
- Average: 63

Family domain

Communities That Care

Risk factor addressed	Program strategy	Protective factors					Developmental period
		Healthy beliefs/ clear standards	Bonding	Opportunities	Skills	Recognition	
Family history of the problem behavior	Prenatal/infancy programs	✔	✔	✔	✔	✔	Prenatal-2
Family management problems	Prenatal/infancy programs	✔	✔	✔	✔	✔	Prenatal-2
	Early childhood education	✔	✔	✔	✔	✔	3-5
	Parent training	✔	✔	✔	✔	✔	Prenatal-14
	Family therapy	✔	✔	✔	✔	✔	6-14
Family conflict	Marital therapy	✔	✔	✔	✔	✔	Prenatal
	Prenatal/infancy programs	✔	✔	✔	✔	✔	Prenatal-2
	Parent training	✔	✔	✔	✔	✔	Prenatal-14
	Family therapy	✔	✔	✔	✔	✔	6-14
Favorable parental attitudes and involvement in the problem behavior	Prenatal/infancy programs	✔	✔	✔	✔	✔	Prenatal-2
	Parent training	✔	✔	✔	✔	✔	Prenatal-14
	Community/ school policies	✔	✔	✔	✔	✔	All

Tested, effective prevention strategies:

Prenatal and infancy programs

- ## Nurse-Family Partnership
  (Olds et al., 1986; Olds & Kitzman, 1993; Olds et al., 1998)

- ## Syracuse Family Development Research Program
  (Lally, Mangione & Honig, 1988)

- ## Infant Health and Development Program
  (Ramey, 1990; Ramey et al., 1992; Liaw et al., 1995)

- ## Keys to CaregivinG videotape series
  (Barnard et al., 1988)

Family domain

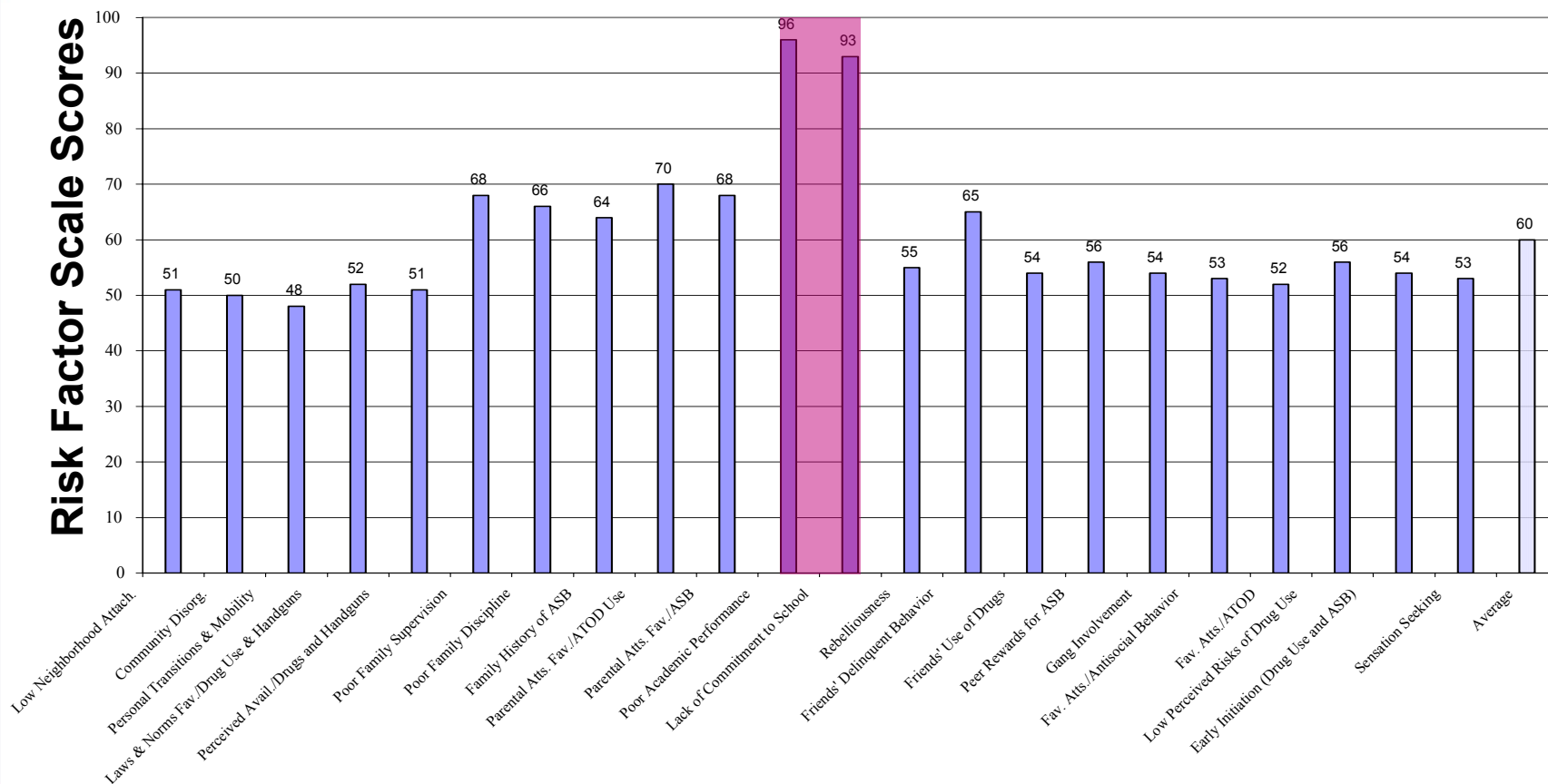| Risk factor addressed	Program strategy	Protective factors					Developmental period
		Healthy beliefs/ clear standards	Bonding	Opportunities	Skills	Recognition	
Family history of the problem behavior	Prenatal/infancy programs	✔	✔	✔	✔	✔	Prenatal-2
Family management problems	Prenatal/infancy programs	✔	✔	✔	✔	✔	Prenatal-2
	Early childhood education	✔	✔	✔	✔	✔	3-5
	Parent training	✔	✔	✔	✔	✔	Prenatal-14
	Family therapy	✔	✔	✔	✔	✔	6-14
Family conflict	Marital therapy	✔	✔	✔	✔	✔	Prenatal
	Prenatal/infancy programs	✔	✔	✔	✔	✔	Prenatal-2
	Parent training	✔	✔	✔	✔	✔	Prenatal-14
	Family therapy	✔	✔	✔	✔	✔	6-14
Favorable parental attitudes and involvement in the problem behavior	Prenatal/infancy programs	✔	✔	✔	✔	✔	Prenatal-2
	Parent training	✔	✔	✔	✔	✔	Prenatal-14
	Community/ school policies	✔	✔	✔	✔	✔	All

Tested, effective prevention strategies:

Parent training

- Families That Care: Guiding Good Choices
  (Catalano et al., 1998)

- Preparing for School Success
  (Hawkins et al., 1999)

- Iowa Strengthening Families Program
 (Spoth et al., 1998, 1999, 2001)

Risk profile: Neighborhood #2

Risk Factor Scale Scores

Risk Factor	Score
Low Neighborhood Attach.	51
Community Disorg.	50
Personal Transitions & Mobility	48
Laws & Norms Fav./Drug Use & Handguns	52
Perceived Avail./Drugs and Handguns	51
Poor Family Supervision	68
Poor Family Discipline	66
Family History of ASB	64
Parental Atts. Fav./ATOD Use	70
Parental Atts. Fav./ASB	68
Poor Academic Performance	96
Lack of Commitment to School	93
Rebelliousness	55
Friends' Delinquent Behavior	65
Friends' Use of Drugs	54
Peer Rewards for ASB	56
Gang Involvement	54
Fav. Atts./Antisocial Behavior	53
Fav. Atts./ATOD	52
Low Perceived Risks of Drug Use	56
Early Initiation (Drug Use and ASB)	54
Sensation Seeking	53
Average	60

School domain

Communities That Care

Risk factor addressed	Program strategy	Protective factors					Developmental period
		Healthy beliefs/ clear standards	Bonding	Opportunities	Skills	Recognition	
Academic failure beginning in late elementary school	Parent/infancy programs	✓	✓	✓	✓	✓	Prenatal-2
	Early childhood education	✓	✓	✓	✓	✓	3-5
	Parent training	✓	✓	✓	✓	✓	Prenatal-10
	Organizational change in schools	✓	✓	✓	✓	✓	6-18
	Classroom organization, management and instructional strategies	✓	✓	✓	✓	✓	6-18
	Classroom curricula for social competence	✓	✓	✓	✓	✓	6-14
	School behavior management strategies	✓		✓		✓	6-14
	Youth employment with education	✓	✓	✓	✓	✓	15-21

Tested, effective prevention strategies:

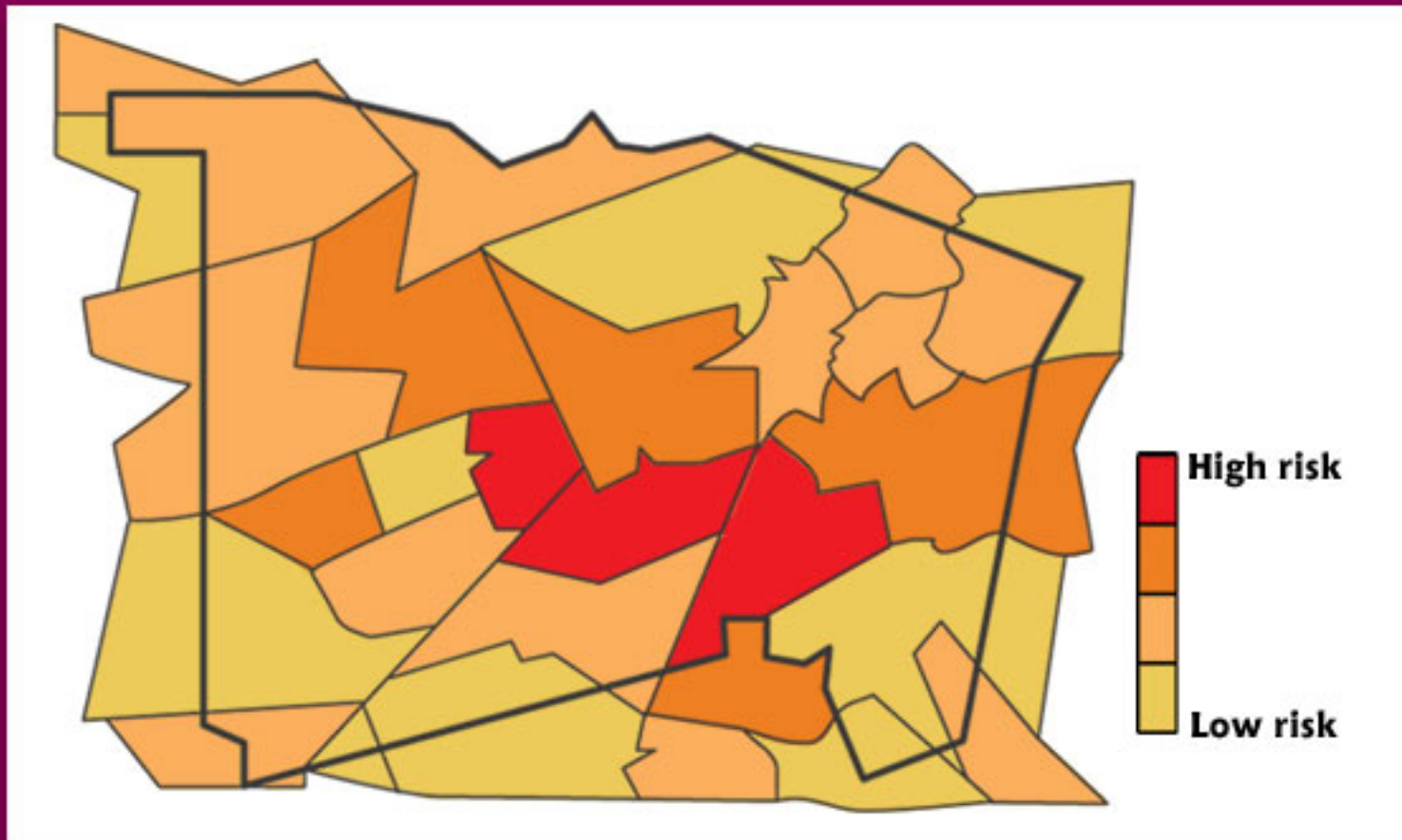## Classroom curricula for social competence
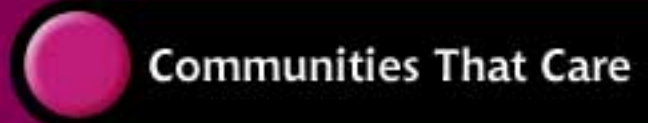
- ## Reconnecting Youth
  (Eggert et al., 1994)

- ## Children of Divorce Intervention Program
  (Pedro-Carroll & Cowen, 1985; Pedro-Carroll et al., 1986, 1992)

Different communities, different strategies

High risk

Low risk

What works?

1. Assessing community levels of risk and protection

2. Prioritizing elevated risks and depressed protective factors

3. Including individuals and groups exposed to the highest levels of risk and the lowest levels of protection
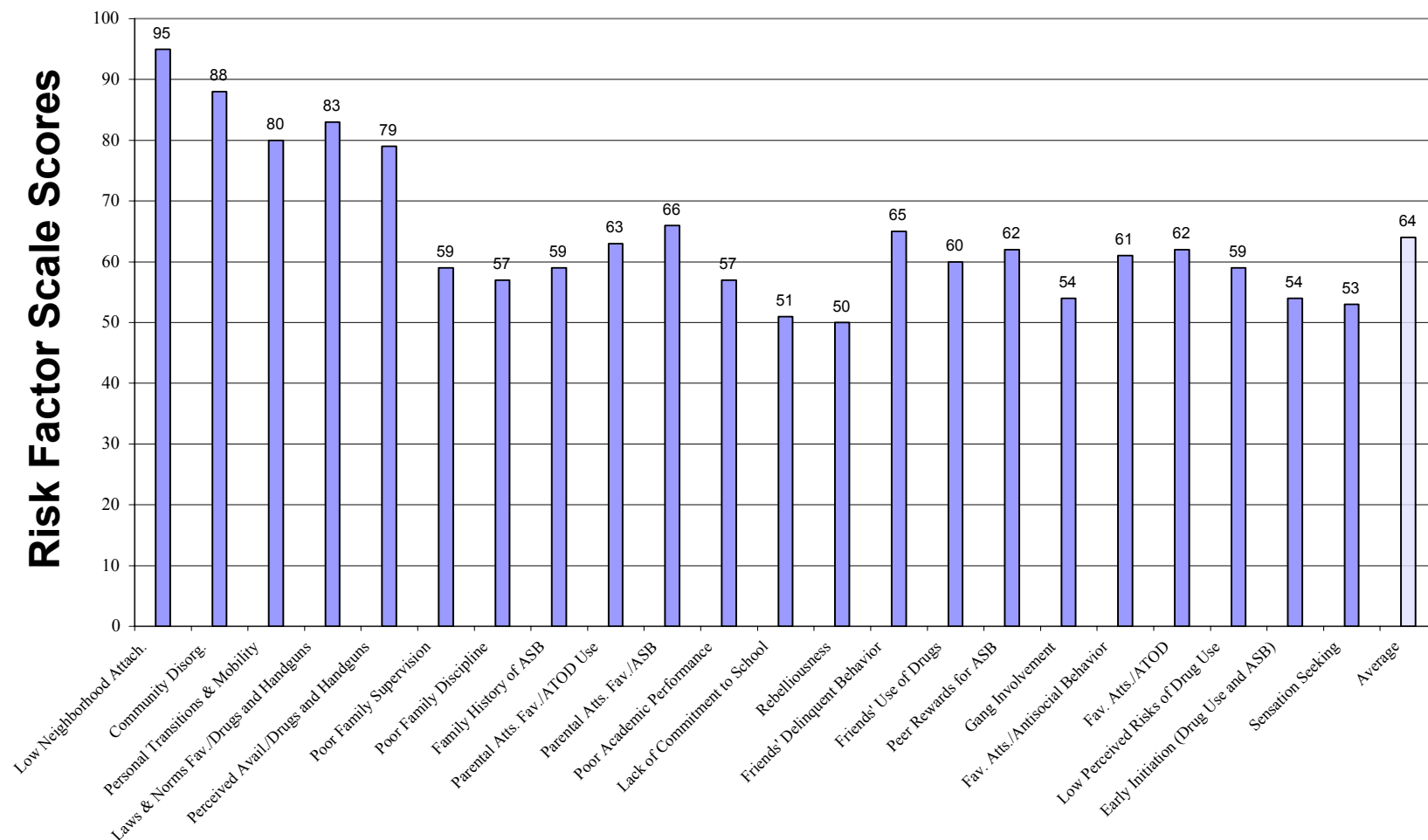
What works?

4. Matching tested, effective programs to the community's risk and protection profile

5. Selecting tested, effective programs that address the racial, economic and cultural characteristics of the community

6. Implementing programs, policies and practices with fidelity at the appropriate ages

Implementing the Communities That Care system

Communities That Care

Getting Started

Organizing, Introducing, Involving

Developing a Community Profile

Creating a Community Action Plan

Implementing and Evaluating the Community Action Plan

The Communities That Care system

Phase One: Getting Started

Purpose: Begin the *Communities That Care* process. Identify:

- people

- scope

- readiness

- resources.

Support: Strategic Consultation; *Tools for Community Leaders: A Guidebook for Getting Started*

Communities That Care

Phase Two: Organizing, Introducing, Involving

Purpose: Prepare Key Leaders, the Community Board and community members for involvement by:

- developing an organizational structure

- creating a work plan

- securing resources to implement the *Communities That Care* system

- confirming milestones and benchmarks to create accountability.

Support: *Key Leader Orientation; Community Board Orientation;* **Technical Assistance as needed**

Phase Three: Developing a Community Profile

Purpose: Identify gaps in current response to priorities.

- Assess risk factors, protective factors and problem behaviors *(Communities That Care Youth Survey).*

- Prioritize risk and protective factors, and populations or geographic areas.

- Complete resources assessment and gaps analysis.

Support: *Community Assessment Training; Community Resources Assessment Training;* **Technical Assistance as needed**

Phase Four: Creating a Community Action Plan

Purpose: Create a plan for implementing and evaluating tested, effective programs, policies and practices.

- Measurable outcomes

- Selection of programs, policies and practices to fill gaps

- Implementation and evaluation plans

Support: *Community Planning Training;* **Technical Assistance as needed**

Phase Five: Implementing and Evaluating the Community Action Plan

Purpose: Implement and evaluate the plan, and refine as needed.

- Implement selected programs, policies and practices.

- Evaluate the process and outcomes.

- Adjust the plan.

Support: *Community Plan Implementation Training;* **Technical Assistance as needed**

Training events

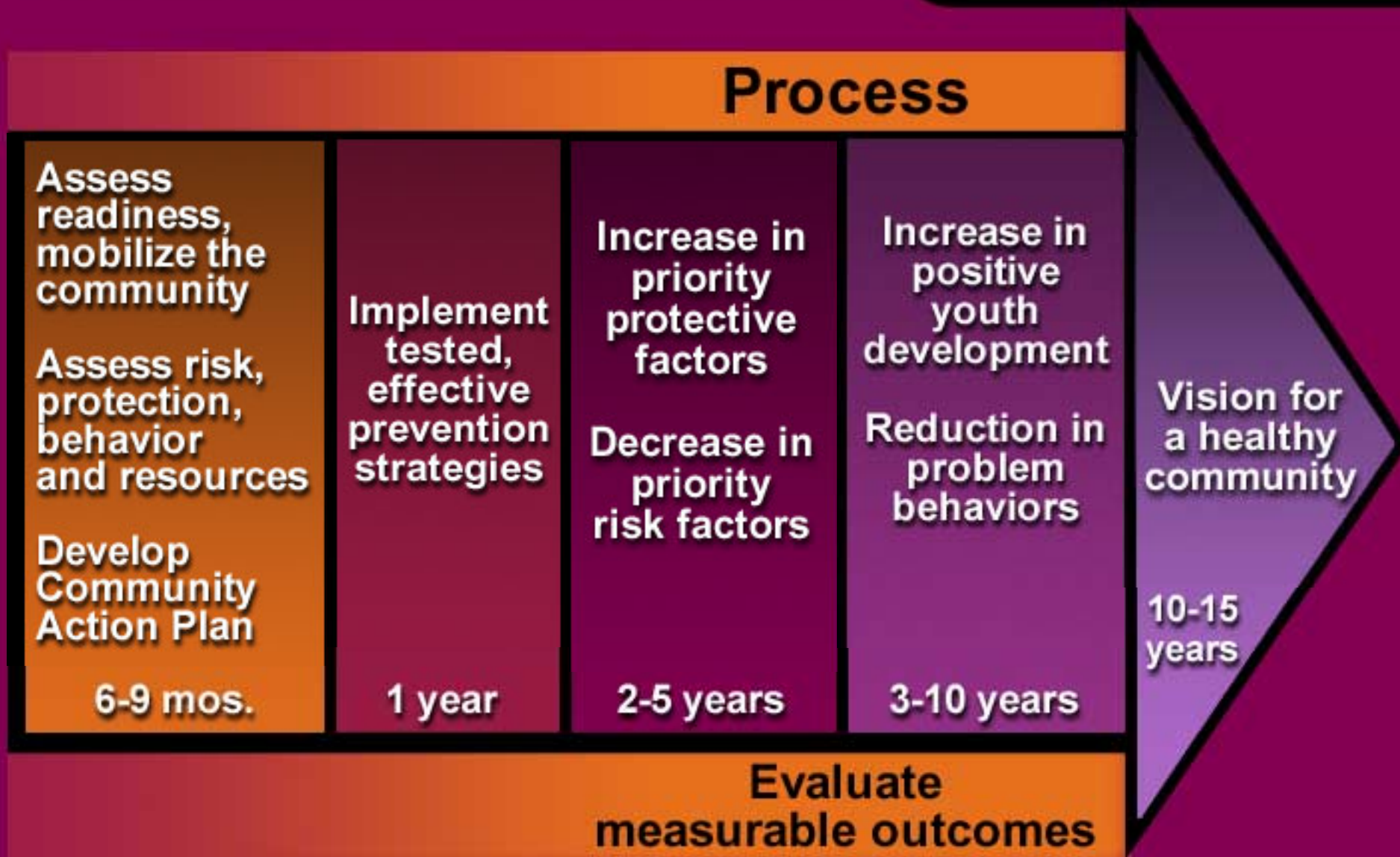| Phase One	• Strategic Consultation
Phase Two	• Key Leader Orientation • Community Board Orientation
Phase Three	• Community Assessment Training • Community Resources Assessment Training
Phase Four	• Community Planning Training
Phase Five	• Community Plan Implementation Training

Community Action Plan:

Key elements

- Broad community involvement and ownership

- Data-driven assessment of risk, protection, behavior and resources

- Mutually agreed-upon focus and priorities

- Research-based programs, policies and practices, building on existing resources

- Outcome-based plan and evaluation strategy

Process and time line

Communities That Care

Process

| Assess readiness, mobilize the community

Assess risk, protection, behavior and resources

Develop Community Action Plan

6-9 mos. | Implement tested, effective prevention strategies

1 year | Increase in priority protective factors

Decrease in priority risk factors

2-5 years | Increase in positive youth development

Reduction in problem behaviors

3-10 years | Vision for a healthy community

10-15 years |

Evaluate measurable outcomes

Benefits of the Communities That Care system

- Shared vision and community norms

- Common language for prevention and youth development

- Coordinated data collection and analysis using a limited, manageable data set

- Integrated planning processes

Jenson et al., 1997; U.S. General Accounting Office, 1996;
Office of Juvenile Justice and Delinquency Prevention, 1996, 1997

Benefits of the Communities That Care system

Increased:

- funding

- collaboration among agencies

- accountability

- use of tested, effective programs

- long-range, strategic focus

- community involvement.

Jenson et al., 1997; U.S. General Accounting Office, 1996;
Office of Juvenile Justice and Delinquency Prevention, 1996, 1997

Benefits of the Communities That Care system

Decreased:

- "turf" conflict

- duplication or fragmentation of resources

- "problem du jour"

- use of untested or proven <u>in</u>effective programs

- community disorganization.

Jenson et al., 1997; U.S. General Accounting Office, 1996;
Office of Juvenile Justice and Delinquency Prevention, 1996, 1997

Example results

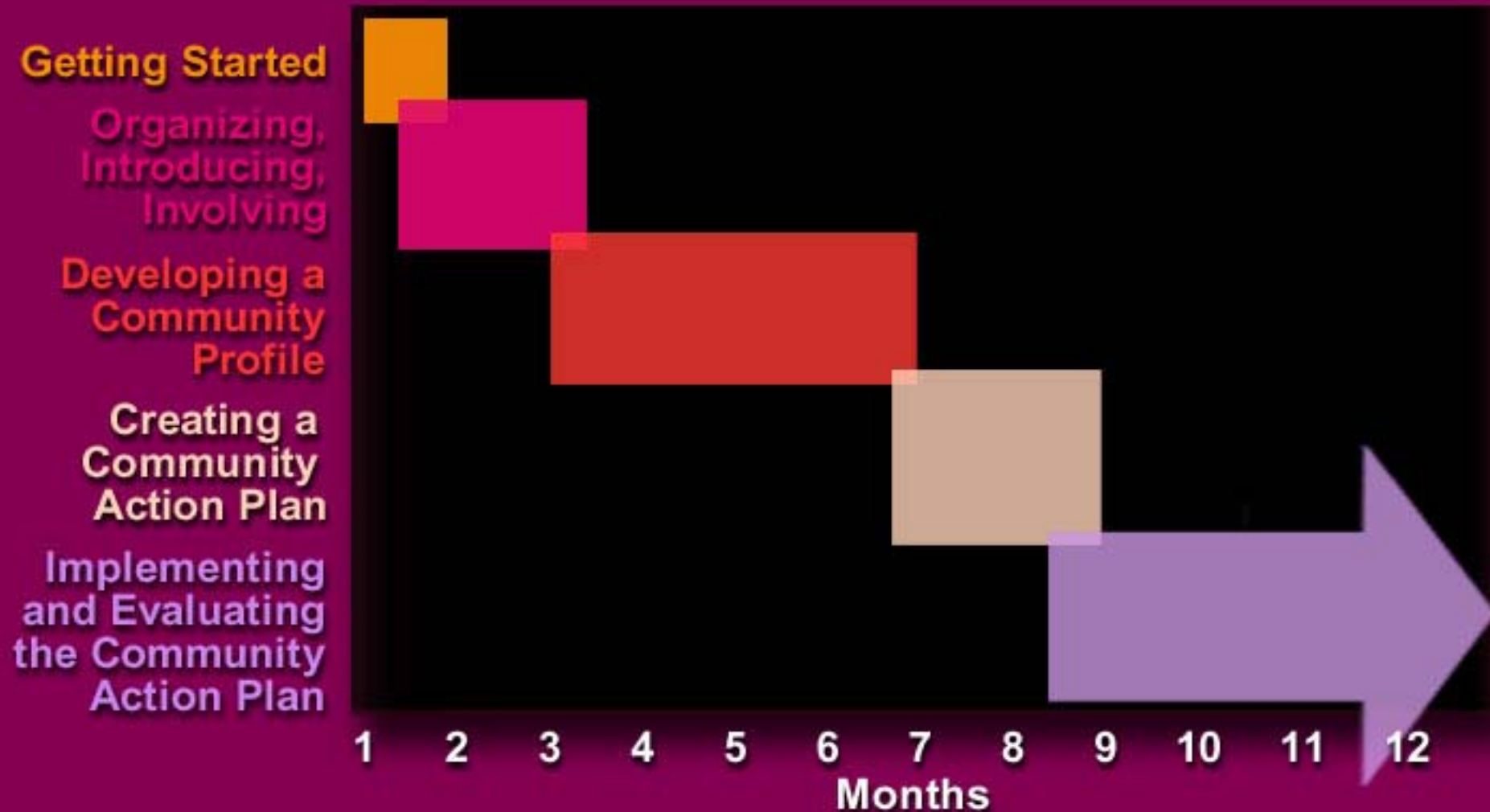|	
Ames, IA	Improved cognitive skills
East Prairie, MO	Improved parenting skills, family relations, community relations
Montgomery County, MD	72% decrease in suspensions; 30% decrease in school problems
Nekoosa, WI	Decrease in student detentions, academic failure, truancy
Lansing, MI	Decrease in fights, suspension; Increased feelings of safety at school
Port Angeles, WA	65% decrease in weapons charges; 45% decrease in burglary; 29% decrease in drug offenses; 27% decrease in assault charges; 18% decrease in larceny

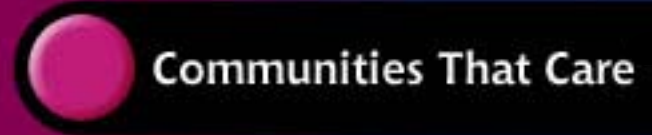Office of Juvenile Justice and Delinquency Prevention, 1996, 1997

First-year time line

Communities That Care

Getting Started

Organizing, Introducing, Involving

Developing a Community Profile

Creating a Community Action Plan

Implementing and Evaluating the Community Action Plan

1 2 3 4 5 6 7 8 9 10 11 12
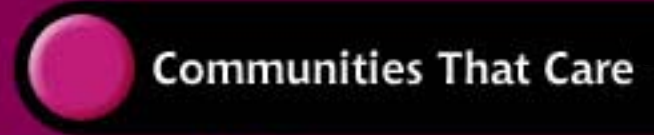
Months

Milestones and benchmarks

- Established for each phase

- Indicate critical steps and procedures

- Document and celebrate accomplishments

- Supported by training modules

The role of Key Leaders in initiating the Communities That Care system

- Commit to the process

- Engage other Key Leaders

- Establish the Community Board

- Oversee implementation of the *Communities That Care* system

- Educate the community about the *Communities That Care* system

The role of Key Leaders in initiating the Communities That Care system
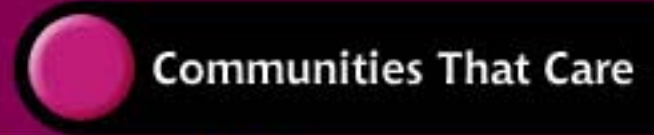
- Hold the Community Board accountable

- Provide access to community resources and information

- Support implementation of the Community Action Plan
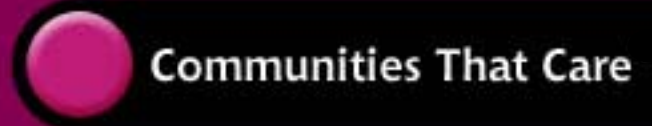
The Community Board

- Represents the community's diversity

- Includes representation from all stakeholder groups

- Requires a three- to five-year commitment

- Requires a broad range of skills

Phase Two:
Organizing, Introducing, Involving

Module 1 — Setting the Stage

Module 2 — Overview: The Research Foundation and Process

Module 3 — Milestone: Address Readiness Issues ← NEXT UP

Module 4 — Milestone: Engage Key Leaders

Module 5 — Milestone: Educate and Involve the Community

Module 6 — Milestone: Create an Effective Community Board

Module 7 — Next Steps